

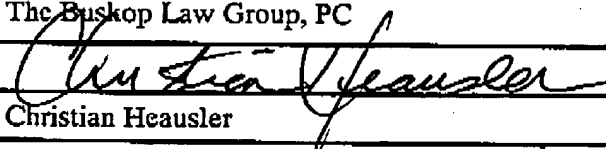
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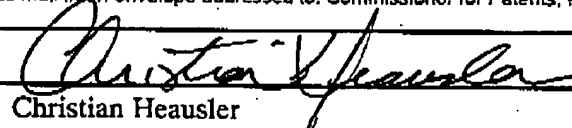
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/785,568	
	Filing Date	02/24/2004	
	First Named Inventor	David Levy	
	Art Unit	3679	
	Examiner Name	Hewitt, James	
Total Number of Pages in This Submission	17	Attorney Docket Number	1237.01A

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="text-align: right;"> RECEIVED OIPE/AP AUG 09 2005 </div>
Remarks 1. This paper is intended as a full and complete response to the Office Action dated April 15, 2005. 2. Attachment A - Corrected Declaration. 3. Petition for One-Month Extension + Fee (in duplicate).		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	The Buskop Law Group, PC	
Signature		
Printed name	Christian Heausler	
Date	8/8/2005	Reg. No. 50,771

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or printed name	Christian Heausler	Date	8/8/2005

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ATTACHMENT A

CORRECTED DECLARATION